## UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

Leena Varughese, M.D.				
(List the full name(s) of the plaintiff(s)/p	12 <sub>_C</sub>	12 <sub>CV</sub> 8812 (CM )(JCF)		
-against-				NOTI
Mt. Sinai Medical Center, Ad	dolfo Firpo-Betanc	· -	LE OF APPEAL	
Patrick Lento, Ira Bleiweiss,	Carlos Cordon-Ca	ardo		
(List the full name(s) of the defendant(s	)/respondent(s).)			
Notice is hereby given that the	e following parties:	Leena Varughese	, M.D.	
(list the names of all parties who are fill	ng an appeal)			
in the above-named case appe	al to the United Stat			
from the <b>I</b> judgment [	March 27, 20			
that: Memorandum decis	on and order gran	, , ,	nt or order was entered on docket) otion for summary	
judgement				
(If the appeal is from an order, provide	a brief description above c	of the decision in the order.	)	
04/22/2015		love lan	1	
Dated		Signature		
Varughese, Leena				
Name (Last, First, MI)		* *****		
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Rev. 12/23/13

<sup>\*</sup>Each party filing the appeal must date and sign the Notice of Appeal and provide his or her mailing address and telephone number, EXCEPT that a signer of a pro se notice of appeal may sign for his or her spouse and minor children if they are parties to the case. Fed. R. App. P. 3(c)(2). Attach additional sheets of paper as necessary.